

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71435	03/7/04
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date			
Final	Original			
1	9	9	12	6
2	01	04	02	07
3	✓	✓	✓	✓
4	✓	✓	✓	✓
5	✓	✓	✓	✓
6	✓	✓	✓	✓
7	✓	✓	✓	✓
8	✓	✓	✓	✓
9	✓	✓	✓	✓
10	✓	✓	✓	✓
11	✓	✓	✓	✓
12	✓	✓	✓	✓
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49	✓	✓	✓	✓
50	✓	✓	✓	✓

Claim	Date			
Final	Original			
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Claim	Date			
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**BEST AVAILABLE COPY** If more than 150 claims or 10 actions  
staple additional sheet here

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